DIRECTIVE NO. EFFECTIVE DATE:	GID {XXXX.Y]	APPROV NAME:	ED BY Signature: Robert D. Strain	
EXPIRATION DATE:		TITLE:	Director	
	COMPL	IANCE IS MAN	NDATORY	
Responsible Office:	[Code / Name of O	ffice originating	or responsible for this document]	
Title: [Document T	itle]			

[Goddard Interim Directives (GIDs) are used when there is a need for a temporary directive that implements Center requirements quickly, and can fulfill that need for up to 12 months until a GPD or GPR can be processed. GIDs shall be prepared in accordance with GPR 1410.1. Each page will contain a standard HEADER which includes the Document Number, Effective Date, Expiration Date, and Page # of #. If a process flow diagram is presented, please use Microsoft word "autoshapes," which is accessible from the "Insert/Picture" menu. There should be no need for a Change History Log. Please consult your Directorate Directives Manager (DDM) prior to creating a new GID.

PLEASE DELETE THE BRACKETED TEXT PRIOR TO SUBMITTING YOUR FINAL DOCUMENT.]

PREFACE

P.1 PURPOSE

[Provide a clear statement identifying the reason or need for the directive.]

P.2 APPLICABILITY

[Specify the GSFC organization(s) area, function, group, and/or personnel to which the directive applies. Exclusions may also be identified.]

P.3 AUTHORITY

[List and identify, by number and title, NASA directives or other higher-level documents that authorize the directive or mandate its need.]

P.4 REFERENCES

[List and identify, by number and title, all documents and forms that are referenced in the body of the GID. References shall refer to be the most recently approved version unless otherwise indicated.]

P.5 CANCELLATION

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[List and identify, by number and title, any directives that are cancelled because they were replaced by the GID and are no longer valid]

P.6 SAFETY

[This section is optional. Identify any safety requirements that apply to the execution of the GID's requirements.]

P.7 TRAINING

[Identify any special training requirements associated with the implementation of the described process.]

P.8 RECORDS

[Describe all records, including forms, recommended or required to carry out the requirements of the GID. In addition, identify, in a Records Table, all records resulting from the GID, the record custodian(s), the record retention schedule, and associated retention period reflected in NPR 1441.1.]

Record Title	Record Custodian	Retention
		*NRRS
		*NRRS

^{*}NRRS – NASA Records Retention Schedules (NPR 1441.1)

P.9 MEASUREMENT/VERIFICATION

[This section is optional. Identify any measurements or other metrics associated with determining the effectiveness of this process to achieve planned results.]

PROCEDURES

In this document, a requirement is identified by "shall," a good practice by "should," permission by "may" or "can," expectation by "will," and descriptive material by "is."

[Detailed narrative defining the "who," "what," "when," and "how" of implementation. This section may be in the form of a narrative and/or a process flow diagram, and should have a "Responsibilities" section. Where safety constraints apply, identify the procedure step and the safety constraints applicable. Warning notes should be in **bold type**. Existing internal/external requirements shall not be replicated in directives. Technical requirements shall not be replicated in directives. There shall be one "shall" statement per paragraph.]

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EXPIRATION DATE:		

Appendix A – Definitions

[Define only those terms unique to the activity/process being described. List them alphabetically, and number as A.1, A.2,]

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Appendix B – Acronyms

[List in alphabetical order.]